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| SERIAL NUMBER 10/762,669 | FILING DATE 01/22/2004 RULE | CLASS 430 | GROUP ART UNIT 1756 | ATTORNEY DOCKET NO. D/A3063 |
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APPLICANTS

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** CONTINUING DATA *****
none

** FOREIGN APPLICATIONS *****
none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 04/27/2004

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|---|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY NY | SHEETS DRAWING 0 | TOTAL CLAIMS 42 | INDEPENDENT CLAIMS 3 |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|

Verified and Acknowledged

Examiner's Signature *[Signature]* Initials

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 Patent Documentation Center
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TITLE
 Photoconductive imaging members

☐ All Fees

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|---|--|--|---|---|--|--------------------------------------|---------------------------------|
| <p>FILING FEE RECEIVED 1166</p> | <p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p> | <table border="1"><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table> | <input type="checkbox"/> 1.16 Fees (Filing) | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) | <input type="checkbox"/> 1.18 Fees (Issue) | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Credit |
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